CLAIMS ONLY

Application Number: 10/806495

Filing Date:

Applicant(s):

*May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT									
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51		3				
2							52		3				
3							53		3				
4							54		3				
5							55		3				
6							56		3				
7							57		3				
8							58		3				
9							59		2				
10							60		2				
11							61		3				
12							62						
13							63	1					
14							64		1				
15							65		1				
16							66		1				
17							67		1				
18							68		1				
19							69		1				
20							70		1				
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27	1						77						
28		3					78						
29							79						
30							80						
31							81						
32							82						
33		1					83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44	1						94						
45		1					95						
46		1					96						
47	1						97						
48		3					98						
49		3					99						
50		3					100						
Total Indep							Total Indep	4					
Total Depend							Total Depend	54					
Total Claims							Total Claims	58					